## \*Personal privacy information\*

Voluntary Industry Reporting Form for 6(a)(2) Adverse Effects Incident Information

| Provide all known,  | required information. If requ  | ired data field in                             | oformation is unkno  | wn, designate as s                        | such in appropriate area. P  | age # 1 of 4  |                                |
|---|--|--|--|---|--|---|--------------------------------|
| Administrative Data   | Reporter name:   |  | Submission date:   | Contact person                            | Contact person (if different than reporter) Internal 1-44547.  |   |                                |
| Data  | Address:   |  |  | Address:                                  |  |   |                                |
|   | Roosevelt Arizona 85545 Phone #:   |  |  | - O28 Phone #:                            |  |   |                                |
|   |  |  |  |   |  |   |                                |
|   | Row 2  Pesticide(s) Involved   | EPA Registration # (Product 1) E               |  | EPA Registration # (Product 2)            |  | EPA Registration  | EPA Registration # (Product 3) |
| A.I. (s)  |  | A.I. (s)                                       |  | A.l. (s)                                  | A.l. (s)   |   |                                |
| Glyphosate, Imazapyr  |  |  |  |   |  |   |                                |
| Product 1 Name  GroundClear Vegetation Killer Concentrate 1 gal |  | Product 2 Name                                 |  | Product 3 Name                            |  |   |                                |
| Exposed to concentrate prior to dilution? Unknown               |  | Exposed to concentrate prior to dilution?      |  | Exposed to concentrate prior to dilution? |  |   |                                |
|   | Formulation  |  | Formulation  |   |  | Formulation   |                                |
| Row 3 Incident Circumstances                                    | Evidence label directions were not followed? No Intentional misuse? No                               | school, indus<br>surface wate<br>building/offi | : (examples inclustrial, nursery/greer, commercial turice, forest/woods, p) right-of-way (ra | enhouse,<br>f,<br>, agricultural          | Situation: (act of using p<br>(examples include mixin<br>application, transportation<br>maintenance of application<br>manufacturing/ formulation | nation: (act of using product): amples include mixing/loading, reentry, lication, transportation, repair/ intenance of application equipment, mufacturing/ formulating) |                                |
|   | Applicator certified PCO? Not applicable   | Own Reside                                     | nce  |   | See Description Notes  |   |                                |
|   | How exposed: (examples include direct contact with treated surface, ingestion, spill, drift, runoff) |  |  |   |  |   |                                |
|   | See Incident Description   |  |  |   |  |   |                                |



6/21/2016 10:10:45 AM Tue 6/21/2016 8:09 AM Clark, Ginny <virginia.clark@scotts.com>

Good Morning, Kia,

I am attaching a letter that we received from a consumer. We have not responded to her as we thought it would be better handled by your team. I think it is very unlikely that it was the Ortho GroundClear that caused her to act strangely and have to spend 2.5 weeks in a mental hospital. Her letter is attached.

Thanks!

Ginny Clark | Consumer Services Sr Specialist The Scotts Miracle-Gro Company 14310 Scottslawn Road | Marysville, OH 43041 P (937)645-2525 | F (937)644-7600 virginia.clark@scotts.com www.scottsmiraclegro.com

6/21/2016 10:14:19 AM May 15,2016

Dear Ortho Group,

I just got out of a mental hospital in Tucson, Az. Trying to figure out what caused me to act the strange way I was acting to have my son take one look at me and call 911 and have me committed for 2.5 weeks.

I live in Roosevelt Lake, Az and I live in a mobile home park across from the marina there. The folks that own these trailers only live here part time so I take care of their lots.

I use Ground Clear and I love it cuz it works good. But I just talked to a guy that said a real good friend of his went crazy after using Round-up. It put him in the hosp. So now I'm thinking that the Ground Clear must have caused me to act the way I was acting which was not good. Don't worry. I'm not suing you or anything just letting you know about it.

Sorry this is hand written cuz I do not own a computer.

Since my hosp stay I am doing much better. But am almost afraid to use my G.C. again euz I do not want to have that happen again.

Thank you,

Roosevelt, AZ 85545

6/21/2016 11:20:42 AM CB to

Called back, left message on voice mail asking for return call and follow-up information.

6/23/2016 2:19:55 PM Callback to

Product ID: GroundClear Vegetation Killer Concentrate

UPC 71549-04306

EPA Reg # 239-2657

Age 58

Is it used according to label directions? She states ves.

She has used it on her trailer property and her neighbor's wkly for the last 2 yrs, at least.

She wears shorts and it can be windy. She thinks she probably gets it on her skin and may inhale it. No noted coughing while using.

She showers and changes clothes right after use.



She first started sxs of crying a lot, hearing voices in her head and doing things she normally wouldn't do around Christmas 2015.

She has been hospitalized 3 times in March, April, May-June.

Her dx is schizoaffective bipolar disorder but she does not believe that.

She gets Risperdal injections q2wks and is much improved.

RESP: I discussed that the product has a low level of toxicity and wide margin of safety when used as directed.

Skin exposure and bathing soon after use would not expect to cause a systemic exposure or have toxic effects.

Inhaling the odor of the product is not a toxic issue.



Voluntary Industry Reporting Form for 6(a)(2) Incident Information Involving Humans

| Demographic information Age: 58 Years Sex: Female Occupation: (if relevant)   | Exposure route: Unknown  | Was adverse effect result of suicide/homicide or attempted suicide/homicide? | Was protective clothing worm (specify)?  Not applicable  |  |
|---|--|--|--|--|
| If female, pregnant?  Did not query   | Was exposure occupational?  No  If yes, days lost due to illness:              | Time between exposure and onset of symptoms:  See Symptoms                   |  |  |
| Type of medical care sought: (examples include none, clinic, hospital emergency department, private physician, PCC, hospital inpatient).  HCF | elude none, clinic, gency department, Abnormal mentation, Unable to determine; |  | If lab tests were performed, list test names and results (If available, submit reports).  Not Reported |  |
| Exposure data:<br>Amount of pesticide:<br>Exposure duration:<br>Weight:   |  |  |  |  |
| Human severity category: HB   |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
|   |  |  | Internal ID #<br>1-44547338  |  |

